

Practitioner's Docket No. ARC 2483N2



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



In re application of: Ayer, Atul D.; Lam, Andrew; Magruder, Judy A.; Hamel, Lawrence and Wong, Patrick S.  
Application No.: 10/005,594 Group No.: 1615  
Filed: 11/07/2001 Examiner: OH, SIMON J.  
For: UNIFORM DRUG DELIVERY THERAPY

Assistant Commissioner for Patents  
Washington, D.C. 20231

### AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

### STATUS

2. Applicant is other than a small entity.

### EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for three months:

Fee: \$920.00

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### CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))

I hereby certify that, on the date shown below, this correspondence is being:

#### MAILING

☒ deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

#### FACSIMILE

☐ transmitted by facsimile to the Patent and Trademark Office.

Date:

10/31/2002

Signature

Maria E. Valenzuela

MARIA E. Valenzuela

(type or print name of person certifying)

## FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)			(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY	
Claims Remaining After Amendment			Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee
Total	15	Minus	20	= 0	x \$18 =	\$0
Indep.	5	Minus	5	= 0	x \$80 =	\$0
First Presentation of Multiple Dependent Claim					+ \$270 =	\$0
Total						Addit. Fee
						\$0

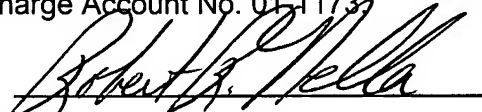
- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3,
  - \*\* If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 1) is less than 20, enter "20".
  - \*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 2) is less than 3, enter "3".
- The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

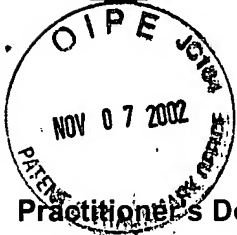
**No additional fee for claims is required.**

## FEE DEFICIENCY

5. If any additional extension and/or fee is required, charge Account No. 01-1173.  
If any additional fee for claims is required, charge Account No. 01-1173.

Date: October 30, 2002

  
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CERTIFICATE OF MAILING UNDER 37 C.F.R. section 1.8(a)

I hereby certify that the attached correspondence comprising:

- 1- Return Receipt Postcard
- 2- This certificate of mailing under 1.8(a) (1 page)
- 3- Petition for Extension of Time (1 page)
- 4- Amendment Transmittal Form (2 pages)
- 5- Amendment (5 pages)

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Maria E. Valenzuela

  
Signature of person mailing paper